Approved Form No. 1034—Revised Form prescribed by Comptroller General, U. S. Soptomber 7, 1950 (Gen. Reg. No. 51, Supp. No. 11) (Amended February 20, 1952) J. S. (Department, bureau, or establishment) (Give place and date)							Page 1 of 1													
											oucher prepar	rea at		(Givo place and date)						
											HE UNITED ST.	ATES, Dr.,	Payee'	s Account No						
, O		Ramo	o-Wooldridge Corpora	ation																
0			ayoo) Los Angeles 45, Ca		я															
	(Add		(Oity)	(State)																
	ARTICLES OR SERVICES			deral supply OUANTITY		UNIT PRICE		AMOUNT												
lo. and Date of Dorder	or Service	schedule, and o Discount Terms	ther information deemed necessar INVOICE	NO.	Qemini -	Cost	Per	Dollars 	Cts.											
			2130	,				327	35											
			2131					327 14,493 694	20.4											
1		 	2132					23,516	12-											
			21.33 21.34					1,420	66											
AYMENT:																				
Complete																				
Partial																				
Final		<u>' </u>	ntinuation sheet(s) if necessary Weight Government	nt B/L No.	<u> </u>	l	Total	40,452	07*											
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certify that the al	bove bill is correc		nent has not been received.	1					1											
		(Sign original only)							1											
Data	*Pavee		o certificato is made by payee on attacked bill or bills																	
		Title Date	Reg. No.		Date		Invoice Rec													
Contract No. A-						/-/														
ursuant to author	rity vested in me,	I certify that this accoun-	t is correct and proper for pay																	
Approved for \$_ STATOT	HR		SIGN																	
3y[~	ORIGINAL		Trans	tro of t	_{ከወ} ለተና	icer) -												
~]	Date			(COII	ontracting Officer)															
Title (Appro	ving Offic	CET	WHEN PURCHASES ARE MADE OR SERVICES	S SECURED WIT	HOUT WRITTEN	AGREEMENT	IN ANY FORM	1	TAT											
		/ <u>*</u>																		
		UNTING CLASSIFICATION	ON (Appropriation Symbol must b	e shown; of	her classinc	tion optic	onai)													